



Attorney Docket: 1501P/BC999066 ✓

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of:

Date: August 7, 2001

Jennie CHING et al.

Serial No.: 09/773,047

Group Art Unit: 2611

Filed: January 29, 2001

Examiner: To Be Assigned

For: METHOD AND SYSTEM FOR OBJECT RETRANSMISSION WITHOUT A  
CONTINUOUS NETWORK CONNECTION IN A DIGITAL MEDIA DISTRIBUTOR SYSTEM

Office of Initial Patent Examination  
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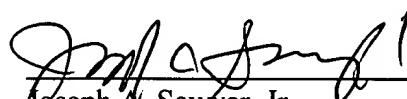
Sir:

Enclosed please find the following:

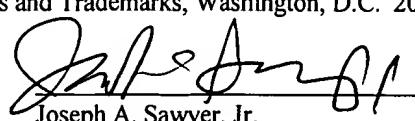
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Repln. Ref: 08/17/2001 SMINASS1 0010403700  
DAH:022120 Name/Number:09773047  
FC: 704 \$25.00 CR

Respectfully submitted,

  
Joseph A. Sawyer, Jr.  
Attorney for Applicant  
Reg. No. 30,801  
(650) 493-4540

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Joseph A. Sawyer, Jr.



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Sir:

Attached is a copy of the official filing receipt received from the PTO in the above application for which issuance of a corrected filing receipt is respectfully requested.

In the title section, please remove "distribution" and replace with --distributor--.

Enclosed is Check No. 3069 in the amount of \$25.00 to cover the fee. The Commissioner is hereby authorized to charge any fees or credit any overpayment associated with this communication to Deposit Account 02-2120.

Respectfully submitted,

Joseph A. Sawyer, Jr.  
Attorney for Applicant  
Reg. No. 30,801  
(650) 493-4540

08/15/2001 SMINASS1 00000094 09773047  
01 FC:227 25.00 OP  
  
Adjustment date: 08/16/2001 SMINASS1 00000094 09773047  
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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY.DOCKET.NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/773,047	01/29/2001	2611	1140	1501P/BC999066	5	35	5

## CONFIRMATION NO. 7262

## CORRECTED FILING RECEIPT



\*OC000000006299687\*

Date Mailed: 07/16/2001

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

## Applicant(s)

Jennie Ching, Northridge, CA;  
 Eric Hsiao, San Mateo, CA;  
 Peter S. Lee, Calabasas, CA;  
 Warren R. Vollinger, Los Angeles, CA;

## Domestic Priority data as claimed by applicant

## Foreign Applications

If Required, Foreign Filing License Granted 03/08/2001

Projected Publication Date: 08/01/2002

Non-Publication Request: No

Early Publication Request: No

## Title

Method and system for object retransmission without a continuous network connection in a digital media distribution system

distributor

## Preliminary Class

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Bib Data Sheet

CONFIRMATION NO. 7262

SERIAL NUMBER 09/773,047	FILING DATE 01/29/2001 RULE	CLASS 348	GROUP ART UNIT 2611	ATTORNEY DOCKET NO. 1501P/BC999066
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APPLICANTS

Jennie Ching, Northridge, CA;  
Eric Hsiao, San Mateo, CA;  
Peter S. Lee, Calabasas, CA;  
Warren R. Vollinger, Los Angeles, CA;

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\*\* CONTINUING DATA \*\*\*\*\*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 03/08/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	CA	5	35	5
Verified and Acknowledged	Examiner's Signature Initials				

ADDRESS

SAWYER LAW GROUP LLP  
P.O. Box 51418  
Palo Alto, CA 94303

TITLE

Method and system for object retransmission without a continuous network connection in a digital media distributor system

FILING FEE RECEIVED 1140	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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